Kidsafe WA

Kidsafe WA is the leading independent not-for-profit organisation dedicated to promoting safety and preventing childhood injuries and accidents in Western Australia. Injuries are the leading cause of death in Australian children aged one to fourteen, accounting for nearly half of all deaths in this age group. More children die of injury than die of cancer, asthma and infectious diseases combined. Many of these deaths and injuries can be prevented. Kidsafe WA works in the community to educate and inform parents and children on staying safe at home, at play and on the road.

Princess Margaret Hospital Injury Surveillance System

Princess Margaret Hospital for Children (PMH) is the only paediatric hospital in Western Australia and is the referral centre for paediatric illness and injury for the state. Every year approximately 60,000 children present to the PMH Emergency Department (ED). The PMH ED Injury Surveillance System is designed to capture data related to all children presenting with an injury. This bulletin provides a summary of the Injury Surveillance System data collected at PMH between 2010 and 2015 relating to primary school-aged children between 5 and 9 years of age.

Injuries to Primary School-aged Children

A snapshot of Injuries to Primary School-aged Children

- Between 2010 and 2015, there was a total of 25,073 injury presentations to the PMH ED for children between 5 and 9 years of age.

- Children between 5 and 9 years of age represent one quarter (26.0%, n=25,073) of total injury presentations.

- Five year olds recorded the greatest number of injuries to primary school-aged children, accounting for 21.6% (n=5,409) of presentations.

- Males are at greater risk of injury amongst primary school-aged children, accounting for 56.0% (n=14,043) of presentations.

- Almost all injuries (99.0%, n=24,812) were due to unintentional circumstances.

- Falls are the most common cause of injury to this age group, accounting for 40.6% (n=10,172) of injuries.

- A fifth of injuries are related to a sporting activity (20.8%, n=5,218).

- Trampoline related injuries are the most common sporting activity associated with injury, accounting for 18.9% (n=986) of sports related injuries.

- A total of 13.1% (n=3,281) of injuries required admission to hospital for further treatment.
Introduction
Primary school-aged children aged between 5 and 9 years are beginning to become more independent, and are spending more time out of the home environment. Despite increased independence, children in this age group are still developing body strength and cognitive skills, and do not always have full capacity to judge hazards appropriately1.

Primary school-aged children account for the lowest number of injuries to the PMH ED out of all three age groups (Figure 1). There has however been an increase in the proportion of injuries to primary school-aged children over the five year period, with this age group accounting for 24.4 percent of injuries in 2010/11 (n=4,469) compared to 27.5 percent in 2014/15 (n=5,459). Over the five year period primary school-aged children accounted for an overall proportion of 26.0 percent.

Demographics
Males record higher rates of injury presentation compared to females across all ages of primary school-aged children, accounting for 56.0 percent of injuries (n=14,043) (Figure 2). Injury prevalence was highest in 5 year olds (21.6%, n=5,409) followed by 9 year olds (20.4%, n=5,122).
Injury

The majority of injuries to primary school-aged children are unintentional (99.0%, n=24,812). The small amount of remaining injuries are due to alleged assault, self-harm or are undetermined or other. The most common cause of injury in this age group is falls, which accounts for almost half of all injuries (40.6%, n=10,172) (Figure 3). This is followed by blunt force (23.5%, n=5,902) and other cause (16.4%, n=4,121).

**Figure 3: Injury by Cause**

- **Falls** 40.6%
- **Blunt Force** 23.5%
- **Other Cause** 16.4%
- **Other Transport** 1.7%
- **Poisoning** 0.4%
- **Pedestrian** 4.9%
- **Bite or Sting** 4.1%
- **Bicycle Related Injury** 3.0%
- **Burns and Scalds** 1.8%
- **Cutting/Piercing** 3.6%
- **Drowning** 0.1%

Sporting activities are involved in one fifth of injuries to primary school-aged children (20.8%, n=5,218). Trampolining is the most common sporting activity (18.9%, n=986), followed by cycling (14.5%, n=755), scootering (12.7%, n=662) and Australian Rules Football (7.5%, n=391).

The location of where the injury occurred is coded as other place for more than half of all injuries (55.4%, n=13,902) (Figure 4). This refers to an unknown location or one that does not fit into an existing category. Of the remaining known locations, the home is the most common location of injury in primary school-aged children (18.8%, n=4,725) followed by school or residential institution (13.3%, n=3,323). Other common locations of injury include recreational or cultural area (6.0%, n=1,505) and road, footpath, cycleway or parking area (2.5%, n=623).

Within the home, the outdoors is the most common specified location for injuries to primary school-aged children (33.1%, n=1,564) (Figure 5). For children of all ages the outdoors is the most common location of injury within the home, however the rate of injuries occurring in the home outdoors for primary school-aged children is more than double that of the babies, toddlers and pre-schoolers age group.
Primary school-aged children are at greater risk of playground-related injury, which is associated with 8.9 percent (n=2,243) of all injuries in this age group. This is over two times the proportion of playground-related injuries in babies, toddlers and pre-schoolers (4.3%, n=1,665), and over five times the proportion of teens and pre-teens (1.6%, n=536). Falls are the most common cause of playground injuries, accounting for 87.2 percent of all playground-related injury presentations (n=1,955).

Most primary school-aged children departed PMH ED with treatment completed (82.3%, n=20,630). The remainder of children were admitted to ward or inpatient unit (13.1%, n=3,281), admitted to short stay (3.0%, n=751), departed without waiting for treatment (0.9%, n=230), or were referred to another PMH department (0.4%, n=89). The small remaining amount of children were either discharged to clinic, departed at their own risk or were admitted to inpatient unit via short stay.

**Prevention**

Primary school-aged children are beginning to spend more time out of the home environment, sometimes without any adults present. As they may begin to take more risks at this age, it is important to ensure the correct safety measures are in place, and to teach them safe practices and rules to follow to prevent injuries.

**At Play**

- Ensure trampolines and other playground equipment meets Australian Standards.
- Regularly check your trampoline and playground equipment for tears, holes, rust and defective or missing parts, and repair or replace any faults that are found before use.
- Always supervise children when they are playing, and teach children how to use equipment safely.
- Ensure your child is using playground equipment that is suitable for their age and stage of development.

**Sport and Physical Activity**

- Always warm up and cool down before exercise.
- Stay well hydrated while participating in sporting activities, particularly during warmer months.
- Ensure young children are participating in modified sports appropriate for their age such as AusKick, Kanga Cricket and NetSetGo.
- Ensure appropriate protective equipment is worn for your chosen sport. This may include mouthguards, eyewear, helmets, protective padding, footwear and gloves.
- Have children participate in training sessions to learn and develop skills for the sport before participating in competitive games.
- Ensure your coach is aware of any existing medical conditions that may affect your child during sporting activities.

**On the Road**

- Teach children to Stop, Look, Listen and Think before crossing the road.
- Encourage children to use safe places to cross the road including crosswalks and traffic lights.
- Always wear brightly coloured clothing to increase visibility to other road users.
- Ensure safety equipment such as helmets are used when on bikes or small-wheeled devices.
- Always use the footpath when on bikes or small-wheeled devices.
- When using footpaths and shared paths keep to the left and give way to pedestrians.

**References**


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